



Statewide Employee Benefits Committee

September 19, 2022



Medicare Advantage Transition

When will this change to a Medicare Advantage plan occur?

Beginning **January 1, 2023**, the State of Delaware Group Health Insurance Plan will offer one Medicare plan option - **Highmark Blue Cross Blue Shield (BCBS) Delaware's Freedom Blue PPO Medicare Advantage Plan (with Part D prescription through SilverScript).**

Medicare Advantage Summary

Highmark Blue Cross Blue Shield Delaware will continue to administer the State Medicare health plan, just as it has for many years with:

- \$0 co-pay for visits with your doctor.
- \$0 deductible for medical services.
- \$0 cost for skilled nursing facility services.
- \$0 cost for nationwide in and out-of-network coverage with providers receiving the Medicare allowable reimbursement for services provided.
- \$0 cost for lab and imaging.
- \$0 cost for emergency room and urgent care services.
- Full and immediate coverage for pensioners with pre-existing conditions.

In addition, the new plan adds:

- The Silver Sneakers® fitness program membership
- Help managing your health and wellness; and,
- Home meal service after a hospital discharge.

Why the change?

- State Employee Benefits Committee (SEBC) routinely reviews benefit options as required by procurement process
- Part of a broader review with the Retirement Benefits Study Committee (RBSC)
- New plan matches benefits and out-of-pocket costs for old plan, with added benefits and lower costs

What is a Medicare Advantage Plan?

- AKA Medicare Part C
- All-in-one alternative to Original Medicare
- Includes Medicare Part A (Hospital), Medicare Part B (Medical) and many include Medicare Part D (Prescription)
- Medicare approves and pays insurance company, which must follow Medicare rules

Is the new plan like other M.A. plans?

This plan is only available to SOD Pensioners and has been specifically designed to provide the same coverage as the old plan.



Are the requirements for Medicare Parts A and B changing?

Enrollment in the new plan does NOT impact eligibility or enrollment requirements for Medicare Parts A and B.



Does enrollment in Medicare Advantage mean giving up Medicare?

Enrollment in MA means Highmark assumes responsibility for all Medicare Part A & B services as long as the pensioner pays their Part B premium.



Can a Pensioner also enroll in other M.A. or Part D coverage?

Pensioners enrolled in another M.A. or Part D plan should contact the Pension Office.

Pensioners enrolled in Special Medicfill without Prescription will receive instructions from the Pension Office.



What if Medicare Part A or B coverage changes?

- The new plan will be required to cover all services approved and available under Medicare Parts A and B throughout the 3-year contract period.
- Prescription benefits will continue to be handled by SilverScripts.



Are covered services the same as the old plan?

The new plan has been specifically designed to cover the same services as the old plan and includes the same SilverScript prescription coverage.



Can Pensioners keep current doctors?

Pensioners can see in-network or out-of-network providers as long as they accept Medicare. Pensioners should call Highmark with questions about providers.



Is a Primary Care provider required?

It is highly encouraged to help coordinate health care needs, but a Primary Care doctor is not required.



Are referrals required to see a specialist?

Referrals are not required for specialist care. Pensioners can see any specialist they want.

(A referral is not the same as a prior authorization.)



What if a provider doesn't accept the new plan?

- Pensioners can still see the provider as an out-of-network provider
- The plan will reimburse the provider at 100% of the Medicare approved amount
- Most providers accept the plan, and Highmark is outreaching to DE providers to minimize disruption
- Pensioners should call the Pension Office or Statewide Benefits Office if their provider says they are not accepting the new plan



Is prior approval for care or services required?

- **In some cases, yes.**
- The services requiring prior approval are detailed in the materials coming from Highmark
- Approval rate is 92%
- Turnaround times for expedited cases: under 2 days
- Turnaround times for standard cases: under 5 days
- Not required for emergency care
- Not applicable for outpatient services until May 1



What if the pensioners does not live in Delaware?

- The network is national
- Pensioners can see any provider who accepts Medicare
- Show the provider the ID card
- Call Highmark or use their online provider search tool for help finding a provider
- Providers send prior authorization requests and pre-visit coverage decisions directly to Highmark regardless of location



Can the pensioner choose not to enroll in the new plan?

Yes, pensioners can opt out during Open Enrollment by contacting the Pension Office, **BUT...**

- The new plan will be the **ONLY** SOD Medicare health plan option
- Pensioners should not opt out if SOD is their only coverage
- Pensioners will not receive the value of the premium for use in purchasing another plan
- Dependents might lose coverage eligibility



When is SOD Medicare Open Enrollment?

October 3 -24, 2022

for benefits effective

January 1, 2023



When will pensioners receive more information?

Open Enrollment packets from the Pension Office were mailed on September 15th.

More information, including a Summary of Benefits and a Medical Benefits Chart is coming from Highmark and will arrive in Pensioner mailboxes in late September. These mailings are already posted on the Highmark Medicare Advantage website.

Open Enrollment Sessions to be held in each county during Open Enrollment

If a pensioner does not enroll this year, will they be able to later?

- Opportunity to enroll or disenroll every year during Medicare Open Enrollment
- Pensioners who enroll during this year's Open Enrollment will not be required to go through medical underwriting or refused enrollment because of pre-existing conditions



If a spouse has other Medicare coverage from a previous employer, are they eligible for the new plan?

- If a spouse is Medicare eligible and offered a Medicare Advantage plan (or cash in lieu of coverage) by their former employer, they will be able to keep their current coverage or enroll in SOD's Medicare Advantage Plan.
- If a spouse is enrolled in an employer sponsored Special Medicfill plan through a former employer, contact the Pension Office to discuss options.



What ID cards will the Pensioner receive/use?

- No longer use red, white, and blue Medicare card
- Pensioners will receive a Highmark Advantage PPO ID card from Highmark in December 2022 to use for all medical care
- Use SilverScript ID card for prescriptions
 - Keep if Pensioner already has one
 - If not currently enrolled in Part D, Pensioner will receive one in December 2022



When will the contract be available?

- The contract and performance guarantees (PGs) are being finalized
- Both will be posted publicly once finalized
- PGs will include detailed monthly reporting on prior approvals and denials and appeals with financial penalties if not met



Why is the premium so much lower?

- Broad network of high-quality physicians share a commitment to preventive care and screenings
- Member engagement in care and disease management programs to help members reach health goals
- Tools and resources to help navigate care so members receive appropriate care in appropriate settings
- SEBC set the premiums for all State plans based upon projected health and prescription plan expenses.



Medicare Advantage Resources

Medicare Advantage Resources

- Statewide Benefits Office [Highmark Delaware Medicare Advantage webpage](#) (also accessible from the [Office of Pensions site](#))
- [Medicare Advantage October Open Enrollment Sessions](#)
- [Medicare Advantage Frequently Asked Questions](#)
- [Highmark Medicare Advantage Pre-OE Mailer](#)
- [Medicare Advantage Medical Benefits Chart](#)
- [State of Delaware Medicare Advantage Mailings/Events Timeline](#)
- Pensioners may contact Highmark BCBS Delaware at **1-888-328-2960 (TTY call 711), seven days a week, 8 a.m. to 8 p.m.** with questions about the Highmark BCBS Delaware Freedom Blue PPO Medicare Advantage plan.
- Pensioners with questions about their enrollment or the State of Delaware Medicare benefits may also contact the Office of Pensions at **1-302-739-4208** or **1-800-722-7300**.

Thank You



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